P04000120721

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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: IUSCANY ENTERPRISES INC (Name of corporation)		
DOCUMENT NUMBER: P04000 120721		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Glenn A. DAVIS JR. (Name of contact person)		
TUSCANY ENTERPRISES (Firm/Company)		
18331 PINES BLVD #147 (Address)		
PEMBROKE PIDES, FL 33029 (City/state and zip code)		
For further information concerning this matter, please call:		
(Name of contact person) at (954) 245-9086 (Area code & daytime telephone number)		
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of FLOCIDA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: TUSCANY ENTER PRISES, INC.
1. The name of the corporation: TUSCANY ENTERPRISES, INC. 2. The principal office address: 18331 Pines Blvd, #147
Pembroko Pines, FL 33029
3. The mailing address (if different):
4. Date of incorporation/qualification: 820 200 Document number: P04000120731
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
JANET ATOCHE
18331 Bines Blud #147
18331 Bines Blvd, #147 Pembroke Pines, FL 33 C 2 9 6. The name and street address of the new registered agent (if changed) and /or registered office
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Call the Nove No
18331 Pines Blvd, #147 (P.O. Box NOT adoptable)
Pembroke Pines, FL 33029
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
(Signature of an officer or director) (Printed or typed name and title)
l hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Glean A Days JR.
(Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *